

IN THE UNITED STATES DISTRICT COURT
EASTERN DISTRICT OF VIRGINIA

COMPLAINT UNDER CIVIL RIGHTS ACT 42 U.S.C. § 1983

Action Number

(To be supplied by the Clerk, U.S. District Court)

Please fill out this complaint form completely. The Court needs the information requested in order to assure that your complaint is processed as quickly as possible and that all your claims are addressed. Please print/write legibly or type.

I. PARTIES

A. Plaintiff:

1. (a) THOMAS WALTER HARP (b) 13041
(Name) (Inmate number)
- (c) 400 AIDEMARLE DRIVE
(Address)
- CHESAPEAKE, VA 23322

Plaintiff MUST keep the Clerk of Court notified of any change of address due to transfer or release. If plaintiff fails to keep the Clerk informed of such changes, this action may be dismissed.

Plaintiff is advised that only persons acting under the color of state law are proper defendants under Section 1983. The Commonwealth of Virginia is immune under the Eleventh Amendment. Private parties such as attorneys and other inmates may not be sued under Section 1983. In addition, liability under Section 1983 requires personal action by the defendant that caused you harm. Normally, the Director of the Department of Corrections, wardens, and sheriffs are not liable under Section 1983 when a claim against them rests solely on the fact that they supervise persons who may have violated your rights. In addition, prisons, jails, and departments within an institution are not persons under Section 1983.

B. Defendant(s):

1. (a) WELLPATH MEDICAL (b) HEALTHCARE PROVIDER
(Name) (Title/Job Description)
- (c) 1283 MURFREESBORO ROAD
(Address)
- NASHVILLE, TN 37217



2. (a) DR. A. TAYLOR (Name) (b) JAIL DOCTOR (Title/Job Description)
(c) 400 ALBEMARLE DRIVE (Address)
CHESAPEAKE, VA 23322
3. (a) CHESAPEAKE CORRECTIONAL CENTER (Name) (b) CORRECTIONAL INSTITUTION (Title/Job Description)
(c) 400 ALBEMARLE DRIVE (Address)
CHESAPEAKE, VA 23322

If there are additional defendants, please list them on a separate sheet of paper. Provide all identifying information for each defendant named.

Plaintiff MUST provide a physical address for defendant(s) in order for the Court to serve the complaint. If plaintiff does not provide a physical address for a defendant, that person may be dismissed as a party to this action.

II. PREVIOUS LAWSUITS

- A. Have you ever begun other lawsuits in any state or federal court relating to your imprisonment? Yes [] No [☒]
- B. If your answer to "A" is Yes: You must describe any lawsuit, whether currently pending or closed, in the space below. If there is more than one lawsuit, you must describe each lawsuit on another sheet of paper, using the same outline, and attach hereto.

1. Parties to previous lawsuit:

Plaintiff(s) _____

Defendant(s) _____

2. Court (if federal court, name the district; if state court, name the county):

3. Date lawsuit filed: _____

4. Docket number: _____

5. Name of Judge to whom case was assigned: _____

6. Disposition (Was case dismissed? Appealed? Is it still pending? What relief was granted, if any?) : _____

III. GRIEVANCE PROCEDURE

A. At what institution did the events concerning your current complaint take place:

CHESAPEAKE CORRECTIONAL CENTER

B. Does the institution listed in "A" have a grievance procedure? Yes [☒] No [☐]

C. If your answer to "B" is Yes:

1. Did you file a grievance based on this complaint? Yes [☐] No [☒]

2. If so, where and when: _____

3. What was the result? COULD NOT GET A GRIEVANCE.

WAS TOLD MATTER WOULD BE HANDLED

4. Did you appeal? Yes [☐] No [☒]

5. Result of appeal: _____

D. If there was no prison grievance procedure in the institution, did you complain to the prison authorities? Yes [☒] No [☐]

If your answer is Yes, what steps did you take? TALKED WITH MAJOR

AND CAPTAIN, IN PERSON.

E. If your answer is No, explain why you did not submit your complaint to the prison authorities:

IV. STATEMENT OF THE CLAIM

State here the facts of your case. Describe how each defendant is involved and how you were harmed by their action. Also include the dates, places of events, and constitutional amendments you allege were violated.

If you intend to allege several related claims, number and set forth each claim in a separate paragraph. Attach additional sheets if necessary.

WELLPATH MEDICAL: IS IN CHARGE OF HEALTHCARE
AT THIS FACILITY. NEGLIGENCE BY THEIR STAFF HIRED
BY THEM TO GIVE PROPER MEDICAL ATTENTION WAS VIOLATED.
THUS LEAVING ME WITH FURTHER MEDICAL ISSUES THAN
I HAD SINCE COMING HERE 15 MONTHS AGO.

DR. A. TAYLOR: FOR NOT DOING HIS JOB AND SEEING
TO MY MEDICAL ISSUES THAT ARE SERIOUS AND I FEEL
ARE LIFE THREATENING. ALL HAVE BEEN NEGLECTED.
I'VE SEEN THIS DOCTOR A FEW TIMES, VOICED MY CONCERNS
AND NEEDS AND HAVE YET TO GET THE MEDICAL
SERVICES I NEED. THIS HAS BEEN GOING ON FOR
15 MONTHS.

CHESAPEAKE CORRECTIONAL CENTER: I HAVE TALKED WITH
OTHER MEDICAL STAFF, MAJOR, CAPTAIN AS WELL AS OTHER
DEPUTIES AND CAN'T GET ANY RESULT FROM ANYONE.

V. RELIEF

I understand that in a Section 1983 action the Court cannot change my sentence, release me from custody or restore good time. I understand I should file a petition for a writ of habeas corpus if I desire this type of relief. TL (please initial)

The plaintiff wants the Court to: (check those remedies you seek)

☒ Award money damages in the amount of \$ 5 MILLION DOLLARS

☐ Grant injunctive relief by _____

☒ Other USE OTHER PROFESSIONAL MEDICAL SERVICES

VI. PLACES OF INCARCERATION

Please list the institutions at which you were incarcerated during the last six months. If you were transferred during this period, list the date(s) of transfer. Provide an address for each institution.

CHESAPEAKE CORRECTIONAL CENTER

VII. CONSENT

CONSENT TO TRIAL BY A MAGISTRATE JUDGE: The parties are advised of their right, pursuant to 28 U.S.C. § 636(c), to have a U.S. Magistrate Judge preside over a trial, with appeal to the U.S. Court of Appeals for the Fourth Circuit.

Do you consent to proceed before a U.S. Magistrate Judge: Yes [☒] No [☐]. You may consent at any time; however, an early consent is encouraged.

VIII. SIGNATURE

If there is more than one plaintiff, each plaintiff must sign for himself or herself.

Signed this 20TH day of MAY, 2020.

Plaintiff Thomas W. H.P.